

## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Deboer et al.  
 App. No. : 10/714,688  
 Filed : November 17, 2003  
 For : METHOD AND STRUCTURE  
 FOR REDUCING CONTACT  
 ASPECT RATIOS  
 Examiner : Bradley Smith  
 Art Unit : 2824

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

Sept. 28, 2004  
 (Date)

Adeel S. Akhtar  
 Adeel S. Akhtar, Reg. No. 41,304

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

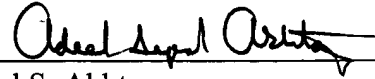
- (X) AMENDMENT AND RESPONSE TO OFFICE ACTION in 6 pages.
- (X) TERMINAL DISCLAIMER in 2 pages, with copy of Power of Attorney document.

The fee has been calculated as shown below:

| FEE CALCULATION     |             |              |                      |              |
|---------------------|-------------|--------------|----------------------|--------------|
| FEE TYPE            |             | FEE CODE     | CALCULATION          | TOTAL        |
| Total Claims        | 17 - 25 = 0 | 1202 (\$18)  | 0 x 18 =             | \$0          |
| Independent Claims  | 1 - 3 = 0   | 1201 (\$86)  | 0 x 86 =             | \$0          |
| Multiple Claim      |             | 1203 (\$290) |                      | \$0          |
| 1 Month Extension   |             | 1251 (\$110) |                      | \$0          |
| 2 Month Extension   |             | 1252 (\$420) |                      | \$0          |
| 3 Month Extension   |             | 1253 (\$950) |                      | \$0          |
| Terminal Disclaimer |             |              |                      | 110          |
|                     |             |              | <b>TOTAL FEE DUE</b> | <b>\$110</b> |

- (X) A check in the amount of \$110 for the Terminal Disclaimer fee is enclosed.
- (X) Return prepaid postcard.

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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